

FORM 5: POPULATION GROUP DATA FOR INDIRECT BENEFICIARIES

This form provides information on the number of persons indirectly benefiting and the distribution of beneficiaries among various population groups. Use one section per CDBG activity to be reported. The total for Indirect Beneficiaries will include all indirect beneficiaries, including those of Hispanic ethnicity. The total for Hispanic Indirect Beneficiaries will include only those indirect beneficiaries of Hispanic ethnicity. If reporting on more than two activities, use additional copies.

Grantee: _____ Project Number: _____

Activity Number:		
Activity Name:		
	Total Indirect Beneficiaries	Hispanic Indirect Beneficiaries
White:		
Black/African American:		
Asian:		
American Indian/Alaskan Native:		
Native Hawaiian/Other Pacific Islander:		
American Indian/Alaskan Native & White:		
Asian & White:		
Black/African American & White:		
Am. Indian/Alaskan Native & Black/African Am.:		
Asian & Native Hawaiian/Other Pacific Islander:		
All Others:		
TOTAL		
Female Head of Household:		
Handicapped (Disabled):		
Elderly:		

Activity Number:		
Activity Name:		
	Total Indirect Beneficiaries	Hispanic Indirect Beneficiaries
White:		
Black/African American:		
Asian:		
American Indian/Alaskan Native:		
Native Hawaiian/Other Pacific Islander:		
American Indian/Alaskan Native & White:		
Asian & White:		
Black/African American & White:		
Am. Indian/Alaskan Native & Black/African Am.:		
Asian & Native Hawaiian/Other Pacific Islander:		
All Others:		
TOTAL		
Female Head of Household:		
Handicapped (Disabled):		
Elderly:		